

6TL097RB67
21-08977

WISCONSIN MOTOR VEHICLE
CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMENT
1300 LANGE COURT
BARABOO, WI 53913
(608) 356-4895

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Document Number Override		Primary Crash Document#		Agency Crash Number 21-08977		Investigating Officer/Deputy DEPUTY C. BRATZ	
Crash Date 09/20/2021		Crash Time 02:14 AM		Date Arrived 09/20/2021		Time Arrived 02:50 AM	
Date Notified 09/20/2021		Time Notified 02:14 AM		Total Units 01		Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure	<input type="checkbox"/> Work Zone	<input type="checkbox"/> Trailer or Towed		<input type="checkbox"/> Reporting Threshold	
<input type="checkbox"/> Government Property		<input type="checkbox"/> Active School Zone		School Bus Related NO		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

Description

Diagram		Reconstruction By	
		Photos By	
		Additional Information NONE	

I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

UNIT ONE DRIVER STATED HE WAS TRAVELING WEST ON CTH PF. UNIT ONE DRIVER AND PASSENGER, IDENTIFIED VERBALLY. UNIT ONE DRIVER STATES RACCOON ENTERED ROADWAY. UNIT ONE DRIVER SWERVED TO MISS ANIMAL CAUSING VEHICLE TO GO ON RIGHT SHOULDER. UNIT ONE DRIVER STATES HE HIT GRAVEL. UNIT ONE DRIVER ATTEMPTED TO GET VEHICLE BACK ON ROADWAY AND OVER CORRECTED STEERING. UNIT ONE CROSSED ROADWAY AND ENTERED INTO OPPOSITE SIDE DITCH. UNIT ONE COLLIDED WITH UTILITY POLE. UNIT ONE SUSTAINED DISABLING DAMAGE AND CAME TO REST NEXT TO POLE. UNIT ONE REMOVED BY TOWING SERVICE. NO INJURIES REPORTED FROM UNIT ONE DRIVER OR PASSENGER. UNIT ONE DRIVER CITED FOR OWI.

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Location

ON CTHPW WB 0.50 MI W OF SLOTTY RD IN THE TOWN OF HONEY CREEK IN SAUK COUNTY	Latitude 43.303959573	Longitude -89.862077359
	X Coordinate 267864.15625	Y Coordinate 4798548
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event NON DOMESTICATED ANIMAL (ALIVE)	First Harmful Event Location ON ROADWAY	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DARK/UNLIT	
Road Surface Condition(s) DRY	Roadway Factor(s) LOOSE GRAVEL	
Environment Factor(s) ANIMAL (S) IN ROADWAY		
Weather Condition(s) CLEAR		
Animal Type RACCOON(S)	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PRIVATE PROPERTY	Crash Classification - Jurisdiction PRIVATE PROPERTY	
Tribal Land	Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION

Unit Summary

UNIT 01	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE		
	Vehicle Type PASSENGER CAR	Operating As Endorsements			
	Total Occs 2	Train/Bus # Recorded	Total # Citations Issued 1	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With UTILITY POLE	Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED	Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)	Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO				

Vehicle

UNIT VEHICLE 01	License Plate Number AJE3410	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number JM1BJ2217X0193605	Make MAZDA	Year 1999	Model PROTEGE
	Color BLK - BLACK	Body Style SD - SEDAN		Bus Use
	Initial Contact Point 11 - LEFT FRONT CORNER	Vehicle Damage		
	Extent Of Damage DISABLING DAMAGE	15 - ALL AREAS		



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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By EVERETTS TOWING	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions FAILURE TO CONTROL			
01 01	Owner Name CHANTELLE JOSIE RICHMOND		Owner Address 9365 STATE ROAD 80 # 2 PLATTEVILLE, WI 53818 , US	
	Sequence Of Events			
01 01	01	Event NON DOMESTICATED ANIMAL (ALIVE)		
	02	Event RUN OFF ROADWAY RIGHT		
	03	Event DITCH		
	04	Event UTILITY POLE		
UNIT	Policy Holder			
	Insurance Company STATE-FARM-GENERAL-INS-CO		Individual CHANTELLE RICHMOND	
UNIT INDIVIDUAL	Individual			
	Driver OAKLEY TYLER LARSEN		Citations Issued 1	Sex MALE
	Address 9365 STATE ROAD 80 # 2 PLATTEVILLE, WI 53818 , US		Date of Birth [REDACTED]	Race
	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			
01 001	Safety Equipment		On Duty Crash	
	Safety Equipment			
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	Injury		Injury Severity NO APPARENT INJURY	Airbag DEPLOYED-FRONT
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED
Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #
Hospital		Date of Death		Time of Death
Distracted By		Distracted By Source OTHER DISTRACTION (ANIMAL, FOOD, GROOMING)		
Distracted By Action OTHER ACTION (LOOKING AWAY FROM TASK ETC)				

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UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		Action					
		Action Other					
		To/From School					
		Drug & Alcohol		Suspected Alcohol Use YES	Suspected Drug Use NO		
		Alcohol Test Given TEST GIVEN		Alcohol Test Type PRELIMINARY BREATH TEST (PBT)		Alcohol Test Results 13	
		Drug Test Given TEST GIVEN		Drug Test Type BLOOD		Drug Test Results PENDING	
		Drug Type					
		Individual Condition UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL					
UNIT	INDIVIDUAL	Individual					
		Passenger CHANTELLE J RICHMOND		Citations Issued 0	Sex FEMALE		
				Date of Birth [REDACTED]	Race WHITE		
		Address 9365 STATE ROAD 80 # 2 PLATTEVILLE, WI 53818 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			
		Safety Equipment		On Duty Crash	Safety Equipment		
		Row 01 - FRONT ROW	Seat Position 09 - RIGHT	SHOULDER & LAP BELT			
		Helmet Use		Helmet Compliance			
		Eye Protection		Tint Compliance			
		UNIT	INDIVIDUAL	Injury		Injury Severity NO APPARENT INJURY	Airbag DEPLOYED-FRONT
				Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED
Medical Transport NOT TRANSPORTED				EMS Agency Identifier		EMS Run #	
Hospital				Date of Death		Time of Death	
Distracted By							
Distracted By Source							
Distracted By Action							
UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		

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UNIT INDIVIDUAL	Prior Action			
	Action			
	Action Other			To/From School
	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	Alcohol Test Results
	Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results
	Drug Type			
	Individual Condition UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL			
	Violations			
	01	UTC Number BB957634	Issue To? 001	Statute Number 346.63(1)(a)
Property Owner				
01	Organization/Company ALLIANT ENERGY		Address 4902 N BILTMORE MADISON, WI 53707 1077, US	
Fixed Objects Struck				
01	Striking Unit 01	Struck Object UTILITY POLE	Structure Number	Damage Tag Number 337847
02	Striking Unit 01	Struck Object DITCH	Structure Number	Damage Tag Number